

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>	J.L.		6/12/00
<b>O.I.P.E. CLASSIFIER</b>	J.L.	413	6/13/00
<b>FORMALITY REVIEW</b>		6905J	6/14/00
<b>RESPONSE FORMALITY REVIEW</b>	J.L.	60139C	7/07/00

## INDEX OF CLAIMS

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
— (Through numeral)...	Canceled	A .....	Appeal
÷ .....	Restricted	O .....	Objected

Claim	Date
Final	
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If more than 150 claims or 10 actions  
staple additional sheet here

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